

**MARY, QUEEN OF THE HOLY ROSARY
601 HILL 'N DALE
LEXINGTON KENTUCKY 40503
(859) 278-7432**

I _____, hereby acknowledge that I understand that I am required to read the Mary, Queen of the Holy Rosary Parish Facility Use Policy dated 07/08 and the Mary, Queen of the Holy Rosary Access Policy Implemented July 2008/ Revised March 2012; I understand that both can be found at <http://home.catholicweb.com/MQHRAAdultFaithFormation/index.cfm/NewsItem?ID=337225> or that by request I will be provided with a copy. I understand that I may meet with my parish to review the policies.

Signature _____

Date _____

Name (Print) _____

MQHR Ministry(ies) _____
